

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10774

FILED
Feb 02, 2009
Secretary of State

Entity Name: SAINT GARABED ARMENIAN ORTHODOX CHURCH OF ORLANDO, INC.

Current Principal Place of Business:

P.O. BOX 1242
WINDERMERE, FL 34786 US

New Principal Place of Business:

100 ST. ANDREWS BLVD
WINTER PARK, FL 32792 US

Current Mailing Address:

P.O. BOX 1242
WINDERMERE, FL 34786 US

New Mailing Address:

FEI Number: 59-3238620 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HARVEY, LUCINE M.
9221 SABAL PALM CIR
PO BOX 1231
WINDERMERE, FL 34786 US

Name and Address of New Registered Agent:

HARVEY, LUCINE M.
9221 SABAL PALM CIR
WINDERMERE, FL 34786 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

02/02/2009

Date

OFFICERS AND DIRECTORS:

Title: CT () Delete
Name: HARVEY, LUCINE M.,
Address: P.O. BOX 1231 N/A
City-St-Zip: WINDERMERE, FL

Title: VC () Delete
Name: NAZARIAN, ARAM
Address: 4700 LAKE SHARP DR
City-St-Zip: ORLANDO, FL

Title: SD () Delete
Name: SHAHINIAN, JOHN,
Address: 1909 BENHURST PL
City-St-Zip: MAITLAND, FL

Title: D () Delete
Name: BOWIE, DANA
Address: PO BOX 3204
City-St-Zip: WINTER PARK, FL 32790

Title: D () Delete
Name: TAKVORIAN, S. THEODO, R
Address: 115 DELLWOOD DR.
City-St-Zip: LONGWOOD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: NAZARIAN, ARAM
Address: 4700 LAKE SHARP DR
City-St-Zip: ORLANDO, FL

Title: D (X) Change () Addition
Name: SHAHINIAN, JOHN,
Address: 1909 BENHURST PL
City-St-Zip: MAITLAND, FL

Title: D (X) Change () Addition
Name: BARGAMIAN, RICHARD
Address: PO BOX 3204
City-St-Zip: WINTER PARK, FL 32790

Title: D (X) Change () Addition
Name: TAKVORIAN, S. THEODO, R
Address: 115 DELLWOOD DR.
City-St-Zip: LONGWOOD, FL 32750

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUCINE M. HARVEY

Electronic Signature of Signing Officer or Director

CT

02/02/2009

Date